

11/30/01

12-03-01

JIRE

PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

**Assistant Commissioner for Patents
Box Reissue
Washington, DC 20231**

Attorney Docket No.	SLUTTER-RE
First Named Inventor	SLUTTER
Original Patent Number	5,995,221
Original Patent Issue Date (Month/Day/Year)	11/30/1999
Express Mail Label No.	EL695228494US

APPLICATION FOR REISSUE OF:

(Check applicable box)

☒

Utility Patent

☐

Design Patent

☐

Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent
format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☐ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
- ☐ Written Consent of all Assignees (PTO/SB/53)
- ☐ 37 C.F.R. § 3.73(b) Statement
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all changes
to the claims. See 37 CFR 1.173 (c).
11. ☐ Original U.S. Patent for surrender
- ☐ Ribbonded Original Patent Grant
- ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: _____

18. CORRESPONDENCE ADDRESS

☒

Customer Number or Bar Code Label

000545

or

☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name					
Address					
City			State	Zip Code	
Country			Telephone	Fax	

NAME (Print/Type)

Anthony H. Handal/ Roger Pitt

Registration No. (Attorney/Agent)

26,275

Signature

[Signature]

46,996

Date

11/30/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORMDocket Number (Optional)
SLUTTER-RE**Claims as Filed - Part 1**

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 83	Total Claims (37 CFR 1.16(j))	(B) 15	****0 =	x \$ _____ =	or	x \$ _____ =	
(C) 9	Independent claims (37 CFR 1.16(i))	(D) 2	* 0 =	x \$ _____ =		x \$ _____ =	
Basic Fee (37 CFR 1.16(h)) \$ _____							\$870.00
Total Filing Fee \$ _____						OR	\$870.00

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee \$ _____						OR	\$ _____	

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

* If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

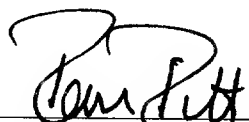
*** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ Please charge Deposit Account No. _____ in the amount of _____.
A duplicate copy of this sheet is enclosed.☐ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. _____.
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

11/30/2001

Date

 46,996

Signature of Applicant, Attorney or Agent of Record

Anthony H. Handal/ Roger Pitt

Typed or printed name

HANDAL & MOROFSKY

Counsellors at Law

80 Washington Street
Norwalk, Connecticut 06854

Telephone: 203-838-8589
Facsimile: 203-838-8794

Paul Morofsky 1926-1986
District of Columbia Office
American Center - Tysons Corner
Suite 500
8300 Boone Boulevard
Vienna, Virginia 22182

November 30, 2001

BOX PATENT APPLICATION

U.S. Patent and Trademark Office
P.O. Box 2327
Arlington, VA 22202

NO FEES ARE AUTHORIZED TO BE PAID AT THIS TIME

Re: Warren SLUTTER et al.
New U.S. Patent Application
Application No. Unknown Filed: Herewith
Reissue of U.S. Patent No. 5,995,221 Dated: November 30, 1999
Attorney Docket No. SLUTTER-RE
"MODIFIED CONCENTRIC SPECTROGRAPH"

S I R :


We enclose herewith:

- ☒ Reissue Patent Application Transmittal Letter;
- ☒ Reissue Application Fee Transmittal Form;
- ☒ Copy of Issued Patent With Certificate of Correction (13 pp);
- ☒ Preliminary Amendment with Status of Claims and Support for Claim Changes;
- ☒ Seven (7) Sheets of Drawings;
- ☒ Acknowledgment Postcard.

Future Fee Payment Authorization: The Commissioner is hereby authorized to charge payment of the fees associated with *future* communications or credit any overpayment to Deposit Account No. 08-0570.

Applicant hereby petitions under 37 CFR 1.136 or other applicable rule to have the response period extended the number of months necessary to render the attached communication timely if a petition is required.

Respectfully submitted,


Anthony H. Handal
Reg. No. 26,275
Roger Pitt
Reg. No. 46,996

Express Mail Label No.
EL695228494US